

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

INDEPENDENCE USA PAC

ADDRESS (number and street)

P.O. Box 7465



Check if different than previously reported. (ACC)

NEW YORK

NY

10150

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00532705

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)
- ☒ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day POST-Election Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
02 01 2021

through

M M M / D D D / Y Y Y Y Y Y
02 28 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Wolfson, Howard, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Wolfson, Howard, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
03 19 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

INDEPENDENCE USA PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
02 / 01 / 2021 To: M M / D D / Y Y Y Y Y Y
02 / 28 / 2021

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2021		188579.16
(b) Cash on Hand at Beginning of Reporting Period.....	78888.54	
(c) Total Receipts (from Line 19)	500000.00	500000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	578888.54	688579.16
7. Total Disbursements (from Line 31).....	406357.02	516047.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	172531.52	172531.52
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	82341.83	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

INDEPENDENCE USA PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
02	/	01	/	2021

To:

M M	/	D D	/	Y Y Y Y
02	/	28	/	2021

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

500000.00

500000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

500000.00

500000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

500000.00

500000.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

500000.00

500000.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

500000.00

500000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	406357.02	516047.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	406357.02	516047.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	406357.02	516047.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	406357.02	516047.64

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	500000.00	500000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	500000.00	500000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	406357.02	516047.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	406357.02	516047.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 11
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

INDEPENDENCE USA PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bloomberg, Michael, R., ,

Mailing Address PO Box 1060

City
New York

State
NY

Zip Code
10150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Bloomberg Inc.

Occupation (for Individual)
Founder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2021

Transaction ID : SA11AI.4631

Amount of Each Receipt this Period

500000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500000.00

500000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

INDEPENDENCE USA PAC

Full Name (Last, First, Middle Initial)

A. Bank of AmericaMailing Address 114 W. 47th St.
6th FloorCity
New YorkState
NYZip Code
10036Purpose of Disbursement
Bank Fee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	2	1		

FEC Identification Number

C

Transaction ID : SB21B.4617

Amount of Each Disbursement this Period

 533.02☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Geller Advisors

Mailing Address 909 Third Avenue

City
New YorkState
NYZip Code
10022Purpose of Disbursement
Financial Advisory Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	1		

FEC Identification Number

C

Transaction ID : SB21B.4615

Amount of Each Disbursement this Period

 10624.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gotham Acme LLCMailing Address 20 West 86th Street
Apt 15BCity
New YorkState
NYZip Code
10024Purpose of Disbursement
Strategy Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	8			2	0	2	1		

FEC Identification Number

C

Transaction ID : SB21B.4618

Amount of Each Disbursement this Period

 395000.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 406157.02

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 11

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

INDEPENDENCE USA PAC

Full Name (Last, First, Middle Initial)

A. The Outcast Agency, LLC

Mailing Address 100 Montgomery Street
Suite 1201

City
San Francisco

State
CA

Zip Code
94104

Purpose of Disbursement
Website Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 12 / 2021

FEC Identification Number

C

Transaction ID : SB21B.4616

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

406357.02

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 9 OF 11

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

INDEPENDENCE USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Geller Advisors

Nature of Debt (Purpose):

Financial Advisory Services

Mailing Address 909 Third Avenue

City

New York

State

NY

Zip Code

10022

Outstanding Balance Beginning This Period

10624.00

Transaction ID : SD10.4609

Amount Incurred This Period

0.00

Payment This Period

10624.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Geller Advisors

Nature of Debt (Purpose):

Financial Advisory Services

Mailing Address 909 Third Avenue

City

New York

State

NY

Zip Code

10022

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4620

Amount Incurred This Period

10141.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10141.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Geller Advisors

Nature of Debt (Purpose):

Post Office Box Rental

Mailing Address 909 Third Avenue

City

New York

State

NY

Zip Code

10022

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4628

Amount Incurred This Period

118.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

118.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

10259.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 10 OF 11

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

INDEPENDENCE USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Outcast Agency, LLCNature of Debt (Purpose):
Website ServicesMailing Address 100 Montgomery Street
Suite 1201City
San FranciscoState
CAZip Code
94104

Outstanding Balance Beginning This Period

200.00

Transaction ID : SD10.4613

Amount Incurred This Period

0.00

Payment This Period

200.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Outcast Agency, LLCNature of Debt (Purpose):
Digital ConsultingMailing Address 100 Montgomery Street
Suite 1201City
San FranciscoState
CAZip Code
94104

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4622

Amount Incurred This Period

50000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Outcast Agency, LLCNature of Debt (Purpose):
Digital ConsultingMailing Address 100 Montgomery Street
Suite 1201City
San FranciscoState
CAZip Code
94104

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4623

Amount Incurred This Period

15000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

65000.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 11 OF 11

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

INDEPENDENCE USA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Outcast Agency, LLCNature of Debt (Purpose):
Digital ConsultingMailing Address 100 Montgomery Street
Suite 1201City
San FranciscoState
CAZip Code
94104

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4624

Amount Incurred This Period

5718.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

5718.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Venable LLPNature of Debt (Purpose):
Legal Services

Mailing Address 600 Massachusetts Avenue, NW

City
WashingtonState
DCZip Code
20001

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4625

Amount Incurred This Period

1364.08

Payment This Period

0.00

Outstanding Balance at Close of This Period

1364.08

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

7082.83

2) **TOTALS** This Period (last page this line number only)..... ►

82341.83

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

82341.83